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APPLICANTS

Kurt Heaton, Pleasanton, CA;
Alan Waterman, Los Gatos, CA;
Jean Kao, Cupertino, CA;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 7	TOTAL CLAIMS 39	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

Kirk D Wong
Hickman Palermo Truong & Becker LLP
2055 Gateway Place
Suite 550
San Jose, CA95110-1089

TITLE

METHOD AND APPARATUS FOR CONTROLLING AT LEAST ONE SET-TOP BOX

FILING FEE RECEIVED 516	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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